

Public Complaint Procedure

The following procedure will be used for all complaints:

1. Within 20 days of the time the complainant first had knowledge or reasonably should have had knowledge of the action upon which the complaint is filed, a student or parent with the complaint shall generally first present it orally and informally to his/her teacher or appropriate school employee;
2. If the complaint is not resolved, the complainant may formally present the complaint in writing (including all supporting statements and evidence) within 10 working days of the informal conference to the principal. The principal shall evaluate the evidence and render a decision within ten working days after receiving the appeal;
3. If the complainant deems it desirable to carry the complaint beyond the decision reached by the principal, he/she may, within five working days, file the complaint with the superintendent or his/her designee. The superintendent or his/her designee shall evaluate the evidence and render a decision within ten working days after receiving the appeal;
4. If the complainant deems it desirable to carry the complaint beyond the decision reached by the superintendent or his/her designee, he/she may within five working days request a review by the Board at its next regularly scheduled meeting. A final determination shall be made within 20 working days from receipt of the appeal by the Board;
5. Persons may, after exhausting local complaint procedures, appeal in writing to the Superintendent of Public Instruction.

Withdrawal

A complaint may be withdrawn by the complainant at any level without prejudice, reprisal or record.

Meeting and Decisions

At each of the levels the complainant shall be given the opportunity to be present and to be heard. All decisions at each level shall be in writings and include supporting rationale with the exception of the initial informal contact. Copies of all decisions and recommendations shall be furnished promptly to all parties of interest.

JACKSON COUNTY SCHOOL DISTRICT 9
COMPLAINT FORM

TO: Name of School: _____

Person Making Complaint: _____

Telephone Number: _____ Date: _____

Nature of Complaint: _____

Suggested Correction: _____

Office Use: Disposition of Complaint: _____ _____ Signature: _____ Date: _____
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cc: District Office